L19000227334

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	,
PICK-UP WAIT MAIL	
(Business Entity Name)	
,	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



900373094829

10/04/21--01014--023 **25.00

2021 CCT -1, PH 12: 14

RAINES

OCT 1 1 2021

I ALBRITTON

COVER LETTER

STIPLECT: Snidow Promotional Products L.L.C.	
SUBJECT: Snidow Promotional Products L.L.C. Name of Limited Liability	y Company
DOCUMENT NUMBER: L19000227334	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	-
Legalzoom.com, Inc.	
Name of Firm/Company	-
9900 Spectrum Dr.	
Address	-
Austin, TX 78717	
City/State and Zip Code	_
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
800	773-0888
Name of Person at (Area Code	Daytime Telephone Number

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115. Florida Statutes, the undersi	gned.	
United States Corp	poration Agents, Inc.	nereby resigns as	
	Name of Registered Agent	icrooy resigns as	
Registered Agent for S	inidow Promotional Products L.L.C.		207
_	-		20/1 OC/1
	Name of Limited Liability Company		1 -1
L19000227334			
Document N	umber, if known		PH 12:
	on was mailed to the above listed limited liability cored and the office discontinued on the 31st day after the		dress:F
	Signature of Resigning Agent	e date on when this staten	ient is med.
If signing on behalf of a	nn entity:		
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Agen	its, Inc.	
	Capacity		
	FILING FEES:		

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, F1, 32314

\$ 85.00 \$ 25.00 Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company